Vendor Registration Form If you would like your company to be included in our database of potential vendors, please fill out this form and submit it by email to

<u>KabulGSOProcurement@state.gov</u>

Company Name		
Complete Street Address		
Country/ City	Country:	City:
Postal Code		
Full Name of Point of Contact		
Position / Title		
Telephone	Land Line#	Mobile #
Fax (if available)		
Email		
Web Page		
CCR Registration	Registered: No Yes	Registration date :
DUN#		
JCCS#	Registered: No Yes	Registration date :
CAGE #		
NCAGE#		
LOCAL LICENSE #	5	
AISA #		
NAICS (*) #		
Main Business Industry		
(Indicate main business		
activity per NAICS Classification) e.g.		
Construction, Mining,		
Subcategory: (Indicate three		
(03) other businesses your		
company does) e.g. Wholesale		
goods, appliances, electronics,		
etc.		
Brief Description of the		
Company Activity (attach max		
two (02) pages):		

(*) NAICS (North American Classification System) Link: http://www.icsc.org/srch/industrylinks/naicsfull.html